

Docket No.: 1293.1127

A6184

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

Jae-seong Shim

Serial No. 09/620,462

Group Art Unit: 2134

Confirmation No.

Filed: July 20, 2000

Examiner: Thomas M. Ho

For: SCRAMBLER AND SCRAMBLING METHOD

RECEIVED

<u>AMENDMENT</u>

JUL 1 3 2004

Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450 **Technology Center 2100**

Sir:

This is in response to the Office Action mailed April 5, 2004, and having a period for response set to expire on July 6, 2004 (July 5, 2004 being a Federal Holiday).

The following amendments and remarks are respectfully submitted. Reconsideration of the claims is respectfully requested.



JUL 0 6 2004 %	}								
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REPLY/AMENDMENT FEE TRANSMITTAL				Attorne	Docket No.	1293.1127			
				Application Number		09/620,462			
				Filing Date		July 20, 2000 RECEIVED			
				First Named Inventor		Jae-seong Shim JUL 1 3 2004			
				Group Art Unit		2134 Technology Center 2			
AMOUNT ENCLOSED 0.00			Examiner Name		Thomas M. HO				
		FEE C	ALCULA	TION (fe	es effective 10	0/01/03)			
CLAIMS AS AMENDED	Claims Remaining After Amendment		Highest Previously		Number Extra	R	ate	Calculations	
OTAL CLAIMS		33	-	46 =	0	X \$ 18	.00 =	\$	0.00
NDEPENDENT LAIMS		5	-	6 =	0	X \$ 86	.00 =		0.00
nade for an ex	tension t	o cover the d	late this re	eply is file	5, 2004, petition of the for which the (\$950); 4 month	requisite fe	e is		
Notice of App									
.			· · · · · · · · · · · · · · · · · · ·		ld fee (\$110.00)			
Information Disclosure Statement (Rule 1.17(p)) (\$180.00)									
Total of above Calculations =								\$	0.00
Reduction by 50% for filing by small entity (37 CFR 1.9, 1.27 & 1.28)								\$	
TOTAL FEES DUE = (1) If entry (1) is less than entry (2), entry (3) is "0".									0.00
) If entry (2) is less th									
) If entry (4) is less th									
i) If entry (5) is less th	an 3, change	entry (5) to "3".							
			MET	THOD OF	PAYMENT				
Check end	closed as	payment.		-					
Charge "T	OTAL FE	ES DUE" to th	e Deposit	Account N	o. below.				
No payme	nt is enclo				t Account are au	thorized at th	is time	(unles	s specifically
required to	J Oblain a	ming date).	GENE	RAL AUTI	HORIZATION	<u> </u>			
If the above-noted "AMOUNT ENCLOSED" is not correct, the Commissi9oner is hereby authorized to credit any overpayment or charge any additional fees necessary to: Deposit Account No. 19-3935									
The Com 37 CFR 1 any relate continuat 1.53(d)) t	missioner I.16 (filing ed applica ions/divisi o maintair	fees) or 37 Cl tion(s) claimin onals/CIPs un n pendency he	rized to cre FR 1.17 (p g benefit h der 37 CF ereof or of a	rocessing ereof purs R 1.53(b)	erpayments or cl fees) during the suant to 35 USC and/or continuati elated applicatio	prosecution § 120 (e.g., ions/divisiona	of this a	pplica	tion, including
SUBMITTED BY			LP			T	1 4= 6	20	
Typed Name		X. Rodriguez				Reg. No.	47,26	59	
Signature	Deurfas	Rodugues				Date		6/04	/
						©2003 Staas	& Halsey	/ LLP	

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